

Iowa Department of Human Services
Medical Assistance Advisory Council (MAAC)
Action Items from the Executive Committee Meeting of June 15, 2017

OUTSTANDING ACTION ITEMS				
Date Added	Action Item	Item Category (Process, Systemic, Legislative)	Who is Responsible for Follow-Up	Status (Outstanding / Complete / In Process / To Be Scheduled)
11/4/2016	Update on the new CMS managed care rules and whether changes are necessary to be in compliance.		Medicaid Director	1/19/17: Discussions regarding different section updates are to be scattered amongst future EC meetings. 3/14/17: Matt Highland presented on the communications standardization of managed care regulations in Executive Committee meeting. To hold future discussion on changes.
2/23/2017	To have presentations regarding Integrated Health Homes and the Health Homes project. UPDATE on March 14, 2017: Deb Johnson and Joyce Vance are to be invited to a future Executive Committee meeting to continue the discussion on Chronic and Integrated Health Homes		Medicaid Director	3/14/17: Presentations took place in the March 14, 2017 Executive Committee meeting. A follow-up presentation will take place at future Executive Committee meeting.
2/23/2017	To have presentation on the coordination between Medicaid and Medicare for dual eligible members in the waiver programs		Medicaid Director	3/14/17: To be discussed in the May 2017 Executive Committee meeting. 4/11/17: To be discussed in June 2017 Executive Committee meeting instead of May 2017 Executive Committee meeting. 6/15/17: To be discussed at future Executive Committee meeting instead of June 2017 Executive Committee meeting.
3/14/2017	Matt Highland and representatives from the three MCOs are to present information regarding mobile applications at a future Executive Committee meeting; after July 2017		Medicaid Director	In Process
3/14/2017	Matt Highland to give an update regarding Communications Standardization for Managed Care Regulations at a future Executive Committee meeting.		Medicaid Director	To Be Scheduled

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4/11/2017	Gather previous quarterly report data regarding the top five reasons for grievances and appeals for comparison to assist in determination if there are systemic trends in the information. The Department is to determine if a quarter by quarter comparison chart regarding this topic should be included in future quarterly reports.		Medicaid Director	Outstanding
4/11/2017	Determine average aggregate cost per member per day for special needs members in ICF/ID.		Medicaid Director	Outstanding
4/11/2017	Examine out-of-state placement for members in facilities to determine the impact on members as well as program. * Border Issues * Medical Conditions * Ages * Other factors leading to out-of-state placement		EC Members and Medicaid Director	Outstanding

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1/19/2017	Public Comment Recommendation: The Department Develop a new methodology to track consistency or prior authorization determinations within each MCO.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: The Department to enforce and communicate to the MCOs the cap after which a PA request is deemed approved (seven days) if a determination has not been made. The MCOs are then to communicate the determination to providers.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Encourage the MCOs to develop consistent service groups or crosswalk standards for PAs to allow for instances where approval is obtained for a specific service or products. Recommend that each of the MCOs develop an exemption process based on medical necessity.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Require MCOs to provide a plain language explanation to Iowa Medicaid members and providers for PA denials.		Medicaid Director	Pending Director Review

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1/19/2017	Public Comment Recommendation: The Department to determine the differences in credentialing requirements between the MCOs and develop a comparison grid of what additional measures beyond the IME's universal credentialing is required by each MCO.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Require the MCOs explain the rationale for additional credentialing requirements beyond what is contractually required by the IME.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Determine the percentage of clean claims payments that are paid on time and accurately based upon the established rate floors to track the accuracy of provider payments.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Regarding clearinghouse to clearinghouse issues: Request that the MCOs provide data related to the initial denail rates from their clearinghousees and include this data in the Managed Care Quarterly Report.		Medicaid Director	Pending Director Review

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1/19/2017	Public Comment Recommendation: Include the accuracy and consistency of information provided by the MCO Customer Service Representatives to both providers and members in the Managed Care Quarterly Report.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Include secret shopper results to the Managed Care Quarterly Report.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Request that the MCOs report information regarding outreach efforts to increase access to care in areas identified in the MCOs' GeoAccess Reports as limited access areas.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Request that MCOs present on results of outreach efforts in order to determine outstanding issues that the MAAC may be able to address.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Request summaries of the MCOs' Consumer Advisory Panels and Clinical Advisory Panels. Request that MCOs make a periodic formal presentation to the MAAC regarding the timely data and feedback obtained from their required advisory panels.		Medicaid Director	Pending Director Review

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1/19/2017	Public Comment Recommendation: Encourage the development of a standardized process across the MCOs to create consistent member material to inform members on what services are provided by each MCO, the process for denying services, and what resources will be given to review available services		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Require MCOs to provide a plain language explanation to Iowa Medicaid members on all MCO denials.		Medicaid Director	Pending Director Review
1/19/2017	Public Comment Recommendation: Require that all MCO provider manuals be clearly posted in an easily accessible format and location on the MCOs' websites and available in hardcopy.		Medicaid Director	Pending Director Review
2/23/2017	General Recommendation: Enforce regulation that Managed Care Organizations (MCOs) follow established state Preferred Drug List (PDL), as required within their contracts.		Medicaid Director	Pending Director Review
2/23/2017	General Recommendation: Encourage the MCOs provide data regarding medication denial rates for MAAC Executive Committee to monitor for future recommendations.		Medicaid Director	Pending Director Review

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6/13/2017

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Date Added	Action Item	Item Category (Process, Systemic, Legislative)	Who is Responsible for Follow-Up	Status (Outstanding / Complete / In Process / To Be Scheduled)
2/23/2017	General Recommendation: Extend the allotted 30 day nursing facility stay for HCBS waiver recipients to 120 days.		Medicaid Director	Pending Director Review

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COMPLETED ACTION ITEMS				
Date Added	Action Item	Item Category (Process, Systemic, Legislative)	Who is Responsible for Follow-Up	Status (Outstanding / Complete / In Process / To Be Scheduled)
11/4/2016	Provide information on status of individuals who are institutionalized in a hospital or facility for beyond 30 days and had been on waiver services although when transitioning out of institution to lose their waiver services.		Medicaid Director	Completed - 1/19/2017: HCBS Recommendations Workgroup created for members who transition out of an institution beyond the allotted 30 days.
11/4/2016	One-pager as preamble to Administrative Rules outlining changes that have been made to the document and submitted to the DHS Council		Medicaid Director	Completed - In rules process.
11/4/2016	Calendar to be developed regarding when reports are to be due and process timeline for when data is to be reviewed and recommendations made. Information to be added to the workplan.		Medicaid Director	Completed - To be handed out at 1/19/17 EC meeting.
5/19/2016	One pager regarding the role of MAAC that members can use with the organizations in which they are representing and stakeholders		Medicaid Director	Completed - Sent via email to EC members on 1/23/17.
11/4/2016	Request that the Attorney General's office attend a future meeting for orientation and the expectations for the EC members in addition to governance training and new sunshine advisory.		Medicaid Director	Completed - Attended February 14, 2017, Full Council meeting.

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2/23/2017	Update on the new CMS managed care rules and whether changes are necessary to be in compliance. UPDATE on February 23, 2017: Matt Highland to present information and progress on new standardization of member content and format in publications at the March 14, 2017, Executive Committee meeting. Within presentation, Matt will also discuss how standardization will impact the grievance and appeals process.		Medicaid Director	Completed - Matt Highland presented on the communications standardization of managed care regulations in March 14, 2017 Executive Committee meeting.
1/19/2017	Explanation and definition of plain language standards		Medicaid Director	Completed - Discussed in March 14, 2017 Executive Committee meeting.
2/14/2017	Executive Committee to meet with Iowa Medicaid Communications Specialist to discuss reconfiguration of the Iowa Medicaid website for ease of navigation for members/consumers.		Medicaid Director	Completed - Discussed in March 14, 2017 Executive Committee meeting.
2/14/2017	Request that the MCOs assist in advertisement of the IA Health Link Public Comment meetings		Medicaid Director	Completed - Confirmed by the State at March 14, 2017 Executive Committee meeting that MCOs were assisting by way of newsletters, the clinical advisory and the community advisory committees.